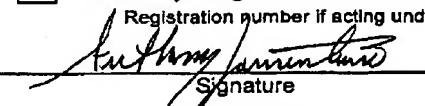


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PTO/SB/22 (04-07)

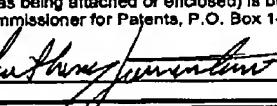
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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2006</b> <b>(Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818).)</b>		Docket Number (Optional)  TOW-068RCE
Application Number	10/800,168-Conf. #9057	Filed  March 12, 2004
For FUEL CELL SYSTEM		
Art Unit  1745	Examiner  E. Wang	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))		<b>Fee</b> \$120      \$60      \$ _____ \$450      \$225      \$ 450.00 \$1020      \$510      \$ _____ \$1590      \$795      \$ _____ \$2160      \$1080      \$ _____ 09/07/2007 VBU111 00000002 120000 10000168
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0080		<b>Small Entity Fee</b> \$ 450.00 DA 02 FC:1252 450.00 DA  Adjustment date: 09/07/2007 VBU111 03/14/2007 SSITHIB1 00000027 120000 10000168 01 FC:1251 120.00 CR
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 38,220 <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
 Signature Anthony A. Laurentano Typed or printed name		September 6, 2007 Date (617) 994-0753 Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of 1 forms are submitted.		

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300 at MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: September 6, 2007

Signature: 

(Anthony A. Laurentano)